

AUG 17 2006

SECTION 11

510(k) Summary

K061980

**Sponsor:** Siemens Medical Solutions USA, Inc.,  
Ultrasound Division  
1230 Shorebird Way  
P.O. Box 7393  
Mountain View, California 94039-7393

**Contact Person:** Sheila W. Pickering  
Telephone: (650) 943 7187  
Fax: (650) 943 7053

**Submission Date:** July 11, 2006

**Device Name:** Siemens Acuson X500 Ultrasound System

**Common Name:** Diagnostic Ultrasound System with Accessories

**Classification:**  
Regulatory Class: II  
Review Category: Tier II  
Classification Panel: Radiology

Ultrasonic Pulsed Doppler Imaging System	FR # 892.1550	Product Code 90-IYN
Ultrasonic Pulsed Echo Imaging System	FR # 892.1560	Product Code 90-IYO
Diagnostic Ultrasound Transducer	FR # 892.1570	Product Code 90-ITX

**A. Legally Marketed Predicate Devices**

The Siemens Acuson X500 Ultrasound system is substantially equivalent to the Siemens Sonoline G60S ultrasound system.

**B. Device Description:**

The Siemens Acuson X500 has been designed to meet the following product safety standards:

- UL 60601-1, Safety Requirements for Medical Equipment
- IEC 60601-2-37 Diagnostic Ultrasound Safety Standards
- CSA C22.2 No. 601-1, Safety Requirements for Medical Equipment
- AIUM/NEMA UD-3, 1998 Standard for Real Time Display of Thermal and Mechanical Acoustic Output Indices on Diagnostic Ultrasound Equipment
- AIUM/NEMA UD-2, 1998 Acoustic Output Measurement Standard for Diagnostic Ultrasound
- 93/42/EEC Medical Devices Directive
- Safety and EMC Requirements for Medical Equipment
  - EN/IEC 60601-1
  - EN/IEC 60601-1-1
  - EN/IEC 60601-1-2
- IEC 1157 Declaration of Acoustic Power
- ISO 10993-1 Biocompatibility

**C. Intended Use**

The Siemens Acuson X500 ultrasound imaging system is intended for the following applications: Abdominal, Intraoperative, Small Parts, Transcranial, OB/GYN, Cardiac, Intracardiac, Transesophageal, Pelvic, Neonatal/Adult Cephalic, Vascular, Intravascular, Musculoskeletal, Superficial Musculoskeletal, Great Vessel, and Peripheral Vascular applications.

**D. Substantial Equivalence**

The submission device is substantially equivalent to the predicate with regard to both intended use and technological characteristics.

**E. Performance Data**

The X500 modifications are verified and validated according to the company's design control process.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

AUG 17 2006

Sheila Pickering, Ph.D.  
Senior Director of Regulatory Affairs  
Siemens Medical Solutions USA, Inc.  
1230 Shorebird Way  
P.O. Box 7393  
MOUNTAIN VIEW CA 94039-7393

Re: K061980

Trade Name: Siemens Acuson X500™ Ultrasound System  
Regulation Number: 21 CFR 892.1550  
Regulation Name: Ultrasonic pulsed doppler imaging system  
Regulation Number: 21 CFR 892.1560  
Regulation Name: Ultrasonic pulsed echo imaging system  
Regulation Number: 21 CFR 892.1570  
Regulation Name: Diagnostic ultrasonic transducer  
Regulatory Class: II  
Product Code: IYN, IYO, and ITX  
Dated: July 11, 2006  
Received: July 17, 2006

Dear Dr. Pickering:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

This determination of substantial equivalence applies to the following transducers intended for use with the Siemens Acuson X500™ Ultrasound System, as described in your premarket notification:



*Protecting and Promoting Public Health*

Transducer Model Number

<u>C5-2 Convex Array</u>	<u>VF13-5 Linear Array</u>
<u>C6-2 Convex Array</u>	<u>VF13-5SP Linear Array</u>
<u>C8-5 Convex Array</u>	<u>7.5L50I Linear Array</u>
<u>5.0C50+ Convex Array</u>	<u>7.5L50Q Linear Array</u>
<u>C6-3 3D Mechanically Driven 3D Convex Array</u>	<u>8L3 Linear Array</u>
<u>EV9-4 Convex Array Endovaginal</u>	<u>C7F2 Curved Array Mechanical 3D</u>
<u>Endo-VII Mechanical Sector Endovaginal</u>	<u>LAP8-4 Laparoscopic</u>
<u>Endo-V 3D Mechanical Sector Endovaginal</u>	<u>P4-2 Phased Sector Array</u>
<u>Ec9-4 Convex Array Endovaginal</u>	<u>5.0P10 Phased Array</u>
<u>BE9-4 Convex Array Endocavity</u>	<u>MPT7-4 Phased Sector Array TEE</u>
<u>5.0L45 Linear Array</u>	<u>CW2</u>
<u>7.5L70 Linear Array</u>	<u>CW5</u>
<u>LB5-2 Linear Array</u>	<u>P9-4 Phased Sector Array</u>
<u>L10-5 Linear Array</u>	<u>CH5-2 Convex Array</u>

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This determination of substantial equivalence is granted on the condition that prior to shipping the first device, you submit a postclearance special report. This report should contain complete information, including acoustic output measurements based on production line devices, requested in Appendix G, (enclosed) of the Center's September 30, 1997 "Information for Manufacturers Seeking Marketing Clearance of Diagnostic Ultrasound Systems and Transducers." If the special report is incomplete or contains unacceptable values (e.g., acoustic output greater than approved levels), then the 510(k) clearance may not apply to the production units which as a result may be considered adulterated or misbranded.

The special report should reference the manufacturer's 510(k) number. It should be clearly and prominently marked "ADD-TO-FILE" and should be submitted in duplicate to:

Food and Drug Administration  
Center for Devices and Radiological Health  
Document Mail Center (HFZ-401)  
9200 Corporate Boulevard  
Rockville, Maryland 20850

This letter will allow you to begin marketing your device as described in your premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus permits your device to proceed to market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address <http://www.fda.gov/cdrh/industry/support/index.html>

If you have any questions regarding the content of this letter, please contact Ralph Shuping at (301) 594-1212.

Sincerely yours,



*for* Nancy C. Brogdon  
Director, Division of Reproductive,  
Abdominal and Radiological Devices  
Office of Device Evaluation  
Center for Devices and Radiological Health

Enclosure(s)

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known): K061780

Device Name:

**SIEMENS ACUSON X500™ Ultrasound System**

Intended Use: Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Abdominal		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Intraoperative (Note 6)		P	P	P		P	P		BMDC	Note 3
Intraoperative Neurological		P	P	P		P	P		BMDC	Note 2,3
Pediatric		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Small Organ (Note 1)		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Neonatal Cephalic		P	P	P	P	P	P		BMDC	Note 2,3
Adult Cephalic		P	P	P	P	P	P		BMDC	Note 2
Cardiac		P	P	P	P	P	P		BMDC	Note 2,7
Transesophageal		P	P	P	P	P	P		BMDC	Note 2,3,7
Transrectal		P	P	P		P	P		BMDC	Note 2,3,4,5
Transvaginal		P	P	P		P	P		BMDC	Note 2,3,4,5
Transurethral										
Intravascular										
Peripheral vessel		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Laparoscopic		P	P	P		P	P		BMDC	Note 3
Musculo-skeletal (Conventional)		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Musculo-skeletal (Superficial)		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Other (specify)										

P = previously cleared by the FDA under # K052894) E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual Format

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)  
 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

*David R. [Signature]*  
 (Division Sign-Off)  
 Division of Reproductive, Abdominal,  
 and Radiological Devices  
 510(k) Number K061980

### Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061170

Device Name:

C5-2 Convex Array Transducer for use with:

**SIEMENS ACUSON X500 Ultrasound System**

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P		P	P		BMDC	Note 2,3,4,5,
Abdominal		P	P	P		P	P		BMDC	Note 2,3,4,5,
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric		P	P	P		P	P		BMDC	Note 2,3,4,5,
Small Organ										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Trans-esophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P		P	P		BMDC	Note 2,3,4,5,
Laparoscopic										
Musculo-skeletal (Conventional)										
Musculo-skeletal (Superficial)										
Other (Specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)



(Division Sign-Off)

Division of Reproductive, Abdominal,  
and Radiological Devices

510(k) Number

K061980

### Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061980

Device Name: C6-2 Convex Array Transducer for use with:

**SIEMENS ACUSON X500 Ultrasound System**

Intended Use: Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P		P	P		BMDC	Note 2,3,4,5,7
Abdominal		P	P	P		P	P		BMDC	Note 2,3,4,5,7
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric		P	P	P		P	P		BMDC	Note 2,3,4,5,7
Small Organ (Note 1)										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P		P	P		BMDC	Note 2,3,4,5,7
Laparoscopic										
Musculo-skeletal (Conventional)										
Musculo-skeletal (Superficial)										
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

*David A. Segerson*

(Division Sign-Off)

Division of Reproductive, Abdominal,  
and Radiological Devices

510(k) Number

K061980



## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

1K061980

Device Name:

C8-5 Convex Array Transducer for use with:

**SIEMENS ACUSON X500 Ultrasound System**

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal		P	P	P		P	P		BMDC	Note 3,4,5
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric		P	P	P		P	P		BMDC	Note 3,4,5
Small Organ (Note 1)		P	P	P		P	P		BMDC	Note 3,4,5
Neonatal Cephalic		P	P	P		P	P		BMDC	Note 3,4,5
Adult Cephalic										
Cardiac		E	E	E		E	E		BMDC	Note 3,4,5,7
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal (Conventional)		P	P	P		P	P		BMDC	Note 3,4,5
Musculo-skeletal (Superficial)		E	E	E		E	E		BMDC	Note 3,4,5
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

Note 1 For example: breast, testes, thyroid, penis, prostate, etc.

Note 2 Ensemble tissue harmonic imaging

Note 3 3D imaging

Note 4 B&W SieScape panoramic imaging

Note 5 Power SieScape panoramic imaging

Note 6 For example: abdominal, vascular

Note 7 Contrast agent imaging

Note 8 Virtual format

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

*David R. Leysman*

(Division Sign-Off)

Division of Reproductive, Abdominal,  
and Radiological Devices

510(k) Number

1K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

1K061980

Device Name: **5.0C50+ Convex Array Transducer for use with:  
SIEMENS ACUSON X500 Ultrasound System**

Intended Use: Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P	P	P	P		BMDC	Note 3,4,5
Abdominal		P	P	P	P	P	P		BMDC	Note 3,4,5
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric		P	P	P	P	P	P		BMDC	Note 3,4,5
Small Organ (Note 1)		P	P	P	P	P	P		BMDC	Note 3,4,5
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P	P	P	P		BMDC	Note 3,4,5
Laparoscopic										
Musculo-skeletal (Conventional)		E	E	E	E	E	E		BMDC	Note 3,4,5
Musculo-skeletal (Superficial)		E	E	E	E	E	E		BMDC	Note 3,4,5
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual Format

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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

*David A. Symon*  
 (Division Sign-Off)  
 Division of Reproductive, Abdominal,  
 and Radiological Devices  
 510(k) Number 1K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061980

Device Name:

**C6-3 3D Mechanically Driven 3D Convex Array Transducer for use with:**

**SIEMENS ACUSON X500 Ultrasound System**

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P		P	P		BMDC	Note 2,3,4,5
Abdominal		P	P	P		P	P		BMDC	Note 2,3,4,5
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric		P	P	P		P	P		BMDC	Note 2,3,4,5
Small Organ (Note 1)										
Neonatal Cephalic		E	E	E		E	E		BMDC	Note 2,3,4,5
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal (Conventional)										
Musculo-skeletal (Superficial)										
Other (specify)										

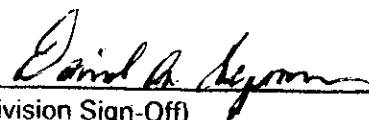
P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

  
 (Division Sign-Off)  
 Division of Reproductive, Abdominal,  
 and Radiological Devices  
 510(k) Number K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061980

Device Name: **EV9-4 Convex Array Endovaginal Transducer for use with:  
SIEMENS ACUSON X500 Ultrasound System**

Intended Use: Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P		P	P		BMDC	Note 2,3,4,5
Abdominal										
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric										
Small Organ (Note 1)										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal		P	P	P		P	P		BMDC	Note 2,3,4,5
Transvaginal		P	P	P		P	P		BMDC	Note 2,3,4,5
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal (Conventional)										
Musculo-skeletal (Superficial)										
Other (specify)										

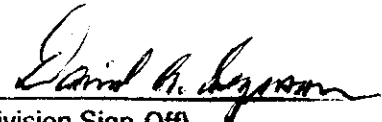
P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

  
 (Division Sign-Off)  
 Division of Reproductive, Abdominal  
 and Radiological Devices  
 510(k) Number K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061980

Device Name: **Endo-VII Mechanical Sector Endovaginal Transducer for use with: SIEMENS ACUSON X500 Ultrasound System**

Intended Use: Ultrasound imaging or fluid flow analysis of the human body as follows:

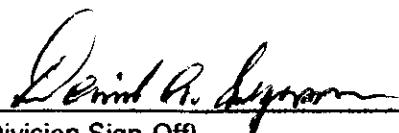
Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P						BM	Note 3
Abdominal										
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric										
Small Organ (Note 1)										
Neonatal Cephalic		P	P						BM	Note 3
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal		P	P						BM	Note 3
Transvaginal		P	P						BM	Note 3
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal Conventional										
Musculo-skeletal Superficial										
Other (specify)										

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- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

  
 (Division Sign-Off)  
 Division of Reproductive, Abdominal,  
 and Radiological Devices  
 510(k) Number K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061980

Device Name: **Endo-V 3D Mechanical Sector Endovaginal Transducer for use with:  
SIEMENS ACUSON X500 Ultrasound System**

Intended Use: Ultrasound imaging or fluid flow analysis of the human body as follows:


Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P						BM	Note 3
Abdominal										
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric										
Small Organ (Note 1)										
Neonatal Cephalic		P	P						BM	Note 3
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal		P	P						BM	Note 3
Transvaginal		P	P						BM	Note 3
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal (Conventional)										
Musculo-skeletal (Superficial)										
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

  
 (Division Sign-Off)  
 Division of Reproductive, Abdominal,  
 and Radiological Devices  
 510(k) Number K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K001980

Device Name: **EC9-4 Convex Array Endovaginal Transducer for use with:  
SIEMENS ACUSON X500 Ultrasound System**

Intended Use: **Ultrasound imaging or fluid flow analysis of the human body as follows:**

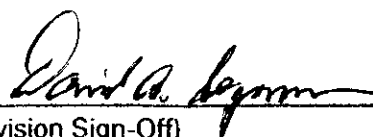
Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P		P	P		BMDC	Note 2,3,4,5
Abdominal										
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric										
Small Organ (Note 1)										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal		P	P	P		P	P		BMDC	Note 2,3,4,5
Transvaginal		P	P	P		P	P		BMDC	Note 2,3,4,5
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal Conventional										
Musculo-skeletal Superficial										
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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Prescription Use (Per 21 CFR 801.109)



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 Division of Reproductive, Abdominal,  
 and Radiological Devices  
 510(k) Number

K001980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K-61980

Device Name: **BE9-4 Convex Array Endocavity Transducer for use with:  
SIEMENS ACUSON X500 Ultrasound System**

Intended Use: Ultrasound imaging or fluid flow analysis of the human body as follows:

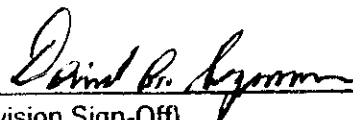
Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P		P	P		BMDC	Note 2,3,4,5
Abdominal										
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric										
Small Organ (Note 1)										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal		P	P	P		P	P		BMDC	Note 2,3,4,5
Transvaginal		P	P	P		P	P		BMDC	Note 2,3,4,5
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal Conventional										
Musculo-skeletal Superficial										
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.
- Note 2 Ensemble tissue harmonic imaging
- Note 3 3D imaging
- Note 4 B&W SieScape panoramic imaging
- Note 5 Power SieScape panoramic imaging
- Note 6 For example: abdominal, vascular
- Note 7 Contrast agent imaging
- Note 8 Virtual format

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

  
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Division of Reproductive, Abdominal,  
and Radiological Devices  
510(k) Number K061980



## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

1061980

Device Name:

5.0L45 Linear Array Transducer for use with:

**SIEMENS ACUSON X500 Ultrasound System**

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Small Organ (Note 1)		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Laparoscopic										
Musculo-skeletal (Conventional)		P	P	P	P	P	P		BMDC	Note 2,3,4,5
Musculo-skeletal (Superficial)										
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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Prescription Use (Per 21 CFR 801.109)

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Division of Reproductive, Abdominal,  
 and Radiological Devices

510(k) Number

*David A. Segerson*

1061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known): K061980

Device Name:

7.5L70 Linear Array Transducer for use with:

SIEMENS ACUSON X500 Ultrasound System

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal										
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric		P	P	P		P	P		BMDC	Note 3,4,5
Small Organ (Note 1)		P	P	P		P	P		BMDC	Note 3,4,5
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		E	E	E		E	E		BMDC	Note 3,4,5
Laparoscopic										
Musculo-skeletal (Conventional)		P	P	P		P	P		BMDC	Note 3,4,5
Musculo-skeletal (Superficial)		P	P	P		P	P		BMDC	Note 3,4,5
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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Prescription Use (Per 21 CFR 801.109)

  
 (Division Sign-Off)

Division of Reproductive, Abdominal,  
 and Radiological Devices

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061980

Device Name:

LB5-2 Linear Array Transducer for use with:

SIEMENS ACUSON X500 Ultrasound System

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P		P	P		BMDC	Note 4,5
Abdominal		P	P	P		P	P		BMDC	Note 4,5
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric										
Small Organ										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal Conventional										
Musculo-skeletal Superficial										
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging

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Prescription Use (Per 21 CFR 801.109)

*David A. Leggett*  
 (Division Sign-Off)  
 Division of Reproductive, Abdominal,  
 and Radiological Devices  
 510(k) Number K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known): K061780

Device Name:

**L10-5 Linear Array Transducer for use with:**

***SIEMENS ACUSON X500 Ultrasound System***

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal		P	P	P		P	P		BMDC	Note 2,3,4,5,8
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric		P	P	P		P	P		BMDC	Note 2,3,4,5,8
Small Organ (Note 1)		P	P	P		P	P		BMDC	Note 2,3,4,5,8
Neonatal Cephalic		P	P	P		P	P		BMDC	Note 2,3,4,5,8
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P		P	P		BMDC	Note 2,3,4,5,8
Laparoscopic										
Musculo-skeletal (Conventional)		P	P	P		P	P		BMDC	Note 2,3,4,5,8
Musculo-skeletal (Superficial)		P	P	P		P	P		BMDC	Note 2,3,4,5,8
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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Division of Reproductive, Abdominal,  
and Radiological Devices  
510(k) Number K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061980

Device Name:

VF13-5 Linear Array Transducer for use with:

SIEMENS ACUSON X500 Ultrasound System

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal										
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric		P	P	P	P	P	P		BMDC	Note 3,4,5,8
Small Organ (Note 1)		P	P	P	P	P	P		BMDC	Note 3,4,5,8
Neonatal Cephalic		P	P	P	P	P	P		BMDC	Note 3,4,5,8
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P	P	P	P		BMDC	Note 3,4,5,8
Laparoscopic										
Musculo-skeletal (Conventional)		P	P	P	P	P	P		BMDC	Note 3,4,5,8
Musculo-skeletal (Superficial)		P	P	P	P	P	P		BMDC	Note 3,4,5,8
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

*David A. Symon*  
 (Division Sign-Off)  
 Division of Reproductive, Abdominal,  
 and Radiological Devices  
 510(k) Number K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known): 1K061980

Device Name:

*VF13-5SP Linear Array Transducer for use with:*

**SIEMENS ACUSON X500 Ultrasound System**

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

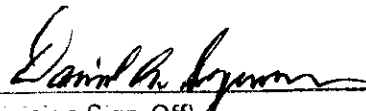
Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal										
Intraoperative (Note 6)		P	P	P		P	P		BMDC	Note 3,4,5,8
Intraoperative Neurological		P	P	P		P	P		BMDC	Note 3,4,5,8
Pediatric		P	P	P		P	P		BMDC	Note 3,4,5,8
Small Organ (Note 1)		P	P	P		P	P		BMDC	Note 3,4,5,8
Neonatal Cephalic		P	P	P		P	P		BMDC	Note 3,4,5,8
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P		P	P		BMDC	Note 3,4,5,8
Laparoscopic										
Musculo-skeletal Conventional		P	P	P		P	P		BMDC	Note 3,4,5,8
Musculo-skeletal Superficial		P	P	P		P	P		BMDC	Note 3,4,5,8
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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 Division of Reproductive, Abdominal,  
 and Radiological Devices  
 510(k) Number 1K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061980

Device Name:

7.5L50I Linear Array Transducer for use with:  
**SIEMENS ACUSON X500 Ultrasound System**

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal		P	P	P		P	P		BMDC	Note 3,4,5
Intraoperative (Note 6)		P	P	P		P	P		BMDC	Note 3,4,5
Intraoperative Neurological										
Pediatric										
Small Organ (Note 1)		P	P	P		P	P		BMDC	Note 3,4,5
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P		P	P		BMDC	Note 3,4,5
Laparoscopic										
Musculo-skeletal Conventional		P	P	P		P	P		BMDC	Note 3,4,5
Musculo-skeletal Superficial										
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

Note 1 For example: breast, testes, thyroid, penis, prostate, etc.

Note 2 Ensemble tissue harmonic imaging

Note 3 3D imaging

Note 4 B&W SieScape panoramic imaging

Note 5 Power SieScape panoramic imaging

Note 6 For example: abdominal, vascular

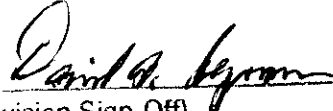
Note 7 Contrast agent imaging

Note 8 Virtual format

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

  
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Division of Reproductive, Abdominal,  
and Radiological Devices  
510(k) Number K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known): 15061980

Device Name: **7.5L50Q Linear Array Transducer for use with:**

**SIEMENS ACUSON X500 Ultrasound System**

Intended Use: Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal		P	P	P		P	P		BMDC	Note 3,4,5
Intraoperative (Note 6)		P	P	P		P	P		BMDC	Note 3,4,5
Intraoperative Neurological										
Pediatric										
Small Organ (Note 1)		P	P	P		P	P		BMDC	Note 3,4,5
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P		P	P		BMDC	Note 3,4,5
Laparoscopic										
Musculo-skeletal (Conventional)		P	P	P		P	P		BMDC	Note 3,4,5
Musculo-skeletal (Superficial)										
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

*David A. Leggett*  
 (Division Sign-Off)  
 Division of Reproductive, Abdominal,  
 and Radiological Devices  
 510(k) Number 15061980



## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061980

Device Name:

8L3 Linear Array Transducer for use with:

### Siemens Acuson X500 Ultrasound System

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal		N	N	N	N	N	N		BMDC	Note 2,3,4,5,8
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric		P	P	P	P	P	P		BMDC	Note 2,3,4,5,8
Small Organ (Note 1)		P	P	P	P	P	P		BMDC	Note 2,3,4,5,8
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P	P	P	P		BMDC	Note 2,3,4,5,8
Laparoscopic										
Musculo-skeletal (Conventional)		P	P	P	P	P	P		BMDC	Note 2,3,4,5,8
Musculo-skeletal (Superficial)										
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

*David A. Johnson*

(Division Sign-Off)  
 Division of Reproductive, Abdominal,  
 and Radiological Devices  
 510(k) Number K061980

## Diagnostic Ultrasound Indications for Use Form

510 (k) Number (if known):

K061980

Device Name:

**C7F2 Curved array mechanical 3D transducer** for use with

**Siemens Acuson X500 Ultrasound System**

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
<b>Ophthalmic</b>										
Fetal		N	N	N		N	N		BMDC	Note 2,3,4,5,7
Abdominal		P	P	P		P	P		BMDC	Note 2,3,4,5,7
Intraoperative Abdominal										
Intraoperative Neurological										
Pediatric		P	P	P		P	P		BMDC	Note 2,3,4,5,7
Small Organ										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Trans-esophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P		P	P		BMDC	Note 2,3,4,5,7
Laparoscopic										
Musculo-skeletal Conventional		P	P	P		P	P		BMDC	Note 2,3,4,5,7
Musculo-skeletal Superficial										
Other (specify)										

N = new indication; P = previously cleared by FDA K033196; E = added under Appendix E

Additional Comments:

- Note 2 Ensemble tissue harmonic imaging
- Note 3 SieClear multi-view spatial compounding
- Note 4 Tissue Equalization Technology
- Note 5 3-Scape real-time 3D imaging
- Note 7 B&W SieScape panoramic imaging

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Prescription Use (Per 21 CFR 801.109)

*David A. Segura*  
(Division Sign-Off)

Division of Reproductive, Abdominal,  
and Radiological Devices

510(k) Number

K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061980

Device Name:

LAP8-4 Laparoscopic Transducer for use with:

SIEMENS ACUSON X500 Ultrasound System

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal										
Intraoperative (Note 6)		P	P	P		P	P		BMDC	Note 3,4,5
Intraoperative Neurological										
Pediatric										
Small Organ (Note 1)										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic		P	P	P		P	P		BMDC	Note 3,4,5
Musculo-skeletal (Conventional)										
Musculo-skeletal (Superficial)										
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

*David R. Ryzman*  
 (Division Sign-Off)

Division of Reproductive, Abdominal,  
 and Radiological Devices  
 510(k) Number

K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

1-K 61980

Device Name:

P4-2 Phased Sector Array Transducer for use with:

**SIEMENS ACUSON X500 Ultrasound System**

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P	P	P	P		BMDC	
Abdominal		P	P	P	P	P	P		BMDC	Note 2,3
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric		P	P	P	P	P	P		BMDC	
Small Organ (Note 1)										
Neonatal Cephalic										
Adult Cephalic		P	P	P	P	P	P		BMDC	Note 2,3
Cardiac		P	P	P	P	P	P		BMDC	Note 2,3,7
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal (Conventional)										
Musculo-skeletal (Superficial)										
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

(Division Sign-Off)

Division of Reproductive, Abdominal,  
 and Radiological Devices

510(k) Number

*David A. Lyson*

1-K 61980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061980

Device Name: **5.0P10 Phased Sector Array Transducer for use with:**

**SIEMENS ACUSON X500 Ultrasound System**

Intended Use: Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P	P	P	P		BMDC	Note 2
Abdominal		P	P	P	P	P	P		BMDC	Note 2
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric		P	P	P	P	P	P		BMDC	Note 2
Small Organ (Note 1)										
Neonatal Cephalic		P	P	P	P	P	P		BMDC	Note 2
Adult Cephalic										
Cardiac		P	P	P	P	P	P		BMDC	Note 2,7
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal (Conventional)										
Musculo-skeletal (Superficial)										
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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 Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

*David R. Lyman*

(Division Sign-Off)  
 Division of Reproductive, Abdominal,  
 and Radiological Devices

K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061980

Device Name:

*MPT7-4 Phased Sector Array TEE Transducer for use with:*

**SIEMENS ACUSON X500 Ultrasound System**

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal										
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric										
Small Organ (Note 1)										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal		P	P	P	P	P	P		BMDC	Note 2,3,7
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal (Conventional)										
Musculo-skeletal (Superficial)										
Other (specify)										


P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

  
 (Division Sign-Off)  
 Division of Reproductive, Abdominal,  
 and Radiological Devices  
 510(k) Number K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061980

Device Name:

CW2 Continuous Wave Doppler Transducer for use with:

**SIEMENS ACUSON X500 Ultrasound System**

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal										
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric										
Small Organ (Note 1)										
Neonatal Cephalic										
Adult Cephalic										
Cardiac					P					
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel										
Laparoscopic										
Musculo-skeletal (Conventional)										
Musculo-skeletal (Superficial)										
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.
- Note 2 Ensemble tissue harmonic imaging
- Note 3 3D imaging
- Note 4 B&W SieScape panoramic imaging
- Note 5 Power SieScape panoramic imaging
- Note 6 For example: abdominal, vascular
- Note 7 Contrast agent imaging
- Note 8 Virtual format

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

*David A. [Signature]*  
(Division Sign-Off)  
Division of Reproductive, Abdominal,  
and Biotechnology Devices  
510(k) Number: K061980

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

*K061980*

Device Name:

*CW5 Continuous Wave Doppler Transducer for use with:*

***SIEMENS ACUSON X500 Ultrasound System***

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal										
Abdominal										
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric										
Small Organ (Note 1)										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel					P					
Laparoscopic										
Musculo-skeletal (Conventional)										
Musculo-skeletal (Superficial)										
Other (specify)										

P = previously cleared by the FDA under # K040060; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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Prescription Use (Per 21 CFR 801.109)

*David R. Egan*  
 (Division Sign-Off)  
 Division of Reproductive, Abdominal  
 and Radiological Devices  
 510(k) Number *K061980*



### Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

K061980

Device Name:

*P9-4 Phased Sector Array Transducer for use with:*

**SIEMENS ACUSON X500 Ultrasound System**

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P	P	P	P		BMDC	Note 2
Abdominal		P	P	P	P	P	P		BMDC	Note 2
Intraoperative (Note 6)										
Intraoperative Neurological		P	P	P		P	P		BMDC	Note 2
Pediatric		P	P	P	P	P	P		BMDC	Note 2
Small Organ (Note 1)		P	P	P	P	P	P			
Neonatal Cephalic		P	P	P	P	P	P		BMDC	Note 2
Adult Cephalic		P	P	P	P	P	P			
Cardiac		P	P	P	P	P	P		BMDC	Note 2,7
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P	P	P	P		BMDC	Note 2
Laparoscopic										
Musculo-skeletal (Conventional)										
Musculo-skeletal (Superficial)										
Other (specify)										

P = previously cleared by the FDA under # K050240; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.  
 Note 2 Ensemble tissue harmonic imaging  
 Note 3 3D imaging  
 Note 4 B&W SieScape panoramic imaging  
 Note 5 Power SieScape panoramic imaging  
 Note 6 For example: abdominal, vascular  
 Note 7 Contrast agent imaging  
 Note 8 Virtual format

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (Per 21 CFR 801.109)

*David R. Lyman*  
 (Division Sign-Off)  
 Division of Reproductive, Abdominal,  
 and Radiological Devices  
 510(k) Number *K061980*

## Diagnostic Ultrasound Indications for Use Form

510(k) Number (if known):

*K061980*

Device Name:

*CH5-2 Convex Array Transducer for use with:*

***SIEMENS ACUSON X500 Ultrasound System***

Intended Use:

Ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application	Mode of Operation									
	A	B	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (Specify)	Other (Specify)
Ophthalmic										
Fetal		P	P	P		P	P		BMDC	Note 2,3,7,8
Abdominal		P	P	P		P	P		BMDC	Note 2,3,7,8
Intraoperative (Note 6)										
Intraoperative Neurological										
Pediatric		P	P	P		P	P		BMDC	Note 2,3,7,8
Small Organ (Note 1)										
Neonatal Cephalic										
Adult Cephalic										
Cardiac										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral vessel		P	P	P		P	P		BMDC	Note 2,3,7,8
Laparoscopic										
Musculo-skeletal (Conventional)										
Musculo-skeletal (Superficial)										
Other (specify)										

P = previously cleared by the FDA under # K043016; E = added under Appendix E.

- Note 1 For example: breast, testes, thyroid, penis, prostate, etc.
- Note 2 Ensemble tissue harmonic imaging
- Note 3 3D imaging
- Note 4 B&W SieScape panoramic imaging
- Note 5 Power SieScape panoramic imaging
- Note 6 For example: abdominal, vascular
- Note 7 Contrast agent imaging
- Note 8 Virtual format

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Prescription Use (Per 21 CFR 801.109)

*David A. Leggett*  
(Division Sign-Off)